

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Wright, Ronnie Lee		Name of Joint Debtor (Spouse) (Last, First, Middle): Wright, Janie Lucille
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-1247		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-5834
Street Address of Debtor (No. and Street, City, and State): 1409 Lincoln Hwy Dekalb, IL <div style="text-align: right;">ZIP Code 60115</div>		Street Address of Joint Debtor (No. and Street, City, and State): 1409 Lincoln Hwy Dekalb, IL <div style="text-align: right;">ZIP Code 60115</div>
County of Residence or of the Principal Place of Business: Dekalb		County of Residence or of the Principal Place of Business: Dekalb
Mailing Address of Debtor (if different from street address): P.O. Box 15 Cortland, IL <div style="text-align: right;">ZIP Code 60112</div>		Mailing Address of Joint Debtor (if different from street address): P.O. Box 15 Cortland, IL <div style="text-align: right;">ZIP Code 60112</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information *** Jeffrey M. Krasner 01524909 *** <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Wright, Ronnie Lee**Wright, Janie Lucille****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **ND IL, WD**

Case Number:

06-71487

Date Filed:

8/18/06

Location

Where Filed: **ND IL, ED**

Case Number:

00-12983

Date Filed:

5/01/00**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

Case Number:

Date Filed:

- None -

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Jeffrey M. Krasner**December 1, 2008**

Signature of Attorney for Debtor(s)

(Date)

Jeffrey M. Krasner**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)_____
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Wright, Ronnie Lee

Wright, Janie Lucille

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Ronnie Lee Wright

Signature of Debtor **Ronnie Lee Wright**

X /s/ Janie Lucille Wright

Signature of Joint Debtor **Janie Lucille Wright**

Telephone Number (If not represented by attorney)

December 1, 2008

Date

Signature of Attorney*

X /s/ Jeffrey M. Krasner

Signature of Attorney for Debtor(s)

Jeffrey M. Krasner 01524909

Printed Name of Attorney for Debtor(s)

LAW OFFICES OF JEFFREY M. KRASNER

Firm Name

a Professional Corporation
407 W State St, Ste 4
Sycamore, IL 60178-1455

Address

Email: krasnerlaw@comcast.net

815-899-8436 Fax: 815-895-1700

Telephone Number

December 1, 2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X _____

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court
Northern District of Illinois

In re Ronnie Lee Wright
Janie Lucille Wright

Debtor(s)

Case No.

Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]* ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Ronnie Lee Wright
Ronnie Lee Wright

Date: December 1, 2008

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court
Northern District of Illinois

In re Ronnie Lee Wright
Janie Lucille Wright

Debtor(s)

Case No.

Chapter

7

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☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]* ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Janie Lucille Wright
Janie Lucille Wright

Date: December 1, 2008

JEFFREY M. KRASNER
LAW OFFICES OF JEFFREY M. KRASNER
A PROFESSIONAL CORPORATION
407 W STATE ST, STE 4
SYCAMORE, IL 60178-1455

ELAN FINCL
CB DISPUTES PO BOX 108
ST LOUIS MO 63166

MERCHANTS CR
223 W JACKSON ST
CHICAGO IL 60606

RONNIE LEE WRIGHT
JANIE LUCILLE WRIGHT
P.O. BOX 15
CORTLAND IL 60112

FINCNTRL SVC
P O BOX 668 N114
GERMANTOWN WI 53022

MRSI
2250 E DEVON AVE STE 352
DES PLAINES IL 60018

ILLINOIS TITLE LOANS, INC.
2733 SYCAMORE ROAD
SUITE B
DE KALB IL 60115

H&R ACCOUNTS
P O BOX 672
MOLINE IL 61266

NCO FIN /99
POB 41466
PHILADELPHIA PA 19101

MIDWESTERN FINANCE CO
8100 W 159TH ST
ORLAND PARK IL 60462

HSTN FUNDING
2620 FOUNTAINVIEW
HOUSTON TX 77057

NCO FIN/99
PO BOX 15636
WILMINGTON DE 19850

CAP ONE
POB 30281
SALT LAKE CITY UT 84130

I C SYSTEM INC
PO BOX 64378
SAINT PAUL MN 55164

NICOR GAS
1844 FERRY ROAD
NAPERVILLE IL 60563

CMI
4200 INTERNATIONAL
CARROLLTON TX 75007

ILLINOIS COLLECTION SE
8231 185TH ST STE 100
TINLEY PARK IL 60487

PALISAD COLL
210 SYLVAN AVE
ENGLEWOOD CLIF NJ 07632

COLLECTION
700 LONGWATER DRIV
NORWELL MA 02061

KCA FINL
628 NORTH STREET
GENEVA IL 60134

PELLETTIERI
991 OAK CREEK DR
LOMBARD IL 60148

COLLECTION COMPANY O
700 LONWATER DRIVE
NORWELL MA 02061

KOMYATTASSOC
9650 GORDON DRIVE
HIGHLAND IN 46322

PINNACLE FIN
7825 WASHINGTON AV
MINNEAPOLIS MN 55439

CREDIT PROTECTION ASSO
13355 NOEL RD STE 2100
DALLAS TX 75240

LVNV FUNDING
P.O. B 10584
GREENVILLE SC 29603

RMA/CHECK IT
PO BOX 6264
ROCKFORD IL 61125

CREDITONEBNK
PO BOX 98872
LAS VEGAS NV 89193

MED BUSI BUR
1460 RENAISSANCE D
PARK RIDGE IL 60068

ROCKFORD MER
PO BOX 5847
ROCKFORD IL 61125

STATE COLLS
PO BOX 6250
MADISON WI 53701

AT&T
C/O CALVARY PORTFOLIO SVCS
PO BOX 27288
TEMPE AZ 85282-7288

CHC HEATING & COOLING
PO BOX 696
SOMONAUK IL 60552

TARGET N.B.
PO BOX 673
MINNEAPOLIS MN 55440

AURORA EMERGENCY ASSOC
C/O DEPENDON COLL SVCS
7627 W LAKE ST, STE 210
RIVER FOREST IL 60305

CITY OF DEKALB
WATER BILLING DEPT
200 S FOURTH STREET
DEKALB IL 60115

TRAC-A-CHEC
PO BOX 2764
DAVENPORT IA 52804

AURORA RADIOLOGY CONS
641 E BUTTERFIELD ROAD
SUITE 407
LOMBARD IL 60148

CITY OF NAPERVILLE
C/O PENN CREDIT CORP
PO BOX 988
HARRISBURG PA 17108-0988

TRAC-A-CHEC
PO BOX 2764
DAVENPORT IA 52809

AURORA RADIOLOGY CONSULTAN
570 E. 22ND ST.
LOMBARD IL 60148

COMCAST
C/O CREDIT PROT ASSOC
13355 NOEL ROAD
DALLAS TX 75247

US BANK
205 W 4TH ST
CINCINNATI OH 45202

BINDAL ANESTHESIOLOGISTS
541 OTIS BOWEN DRIVE
MUNSTER IN 46321

COMED
BILL PAYMENT CENTER
CHICAGO IL 60668-0001

WASHMTL/PROV
PO BOX 9180
PLEASANTON CA 94588

BLUE CROSS BLUE SHIELD
C/O COMPREHENSIVE SVCS
PO BOX 2503
LANSING MI 48826

COMED
C/O NCO FINANCIAL SERVICES
PO BOX 41417, DEPT 99
PHILADELPHIA PA 19101

AMBULATORY SURGICAL CTR
C/O ILLINOIS COLLECTION SV
PO BOX 646
OAK LAWN IL 60454-0646

BOB HART
15607 S. HARLEM AVENUE
ORLAND PARK IL 60462

COMMUNITY HOSPITAL
PATIENT ACCOUNTS
PO BOX 3602
MUNSTER IN 46321

AMERICAN SCHOOL
2200 E. 17TH STREET
LANSING IL 60438

CARDMEMBER SERVICE
CITIZENS FIRST NATIONAL
PO BOX 790408
SAINT LOUIS MO 63179-0408

D.D. DHARKAR, M.D.
5219 N HARLEM
CHICAGO IL 60656

APLM LTD
1050 W KINZIE STREET
CHICAGO IL 60642

CASEY'S
C/O TRAC-A-CHEC, INC
PO BOX 2764
DAVENPORT IA 52809-2764

DE KALB CLINIC
217 FRANKLIN STREET
DEKALB IL 60115

ASSOC PATHOLOGISTS OF JOLI
330 MADISON ST., STE 200A
JOLIET IL 60435

CASTLE BANK
141 W LINCOLN HWY
DEKALB IL 60115

DE KALB MAGNETIC RESONANCE
2475 W. BETHANY RD.
SYCAMORE IL 60178

DEKALB CLINIC
C/O MERCHANTS CREDIT
223 W. JACKSON ST.
CHICAGO IL 60606

EDWARD HOSPITAL & HEALTH S
801 S. WASHINGTON STREET
NAPERVILLE IL 60540-7060

ILLIANA SURGERY & MED CTR
701 SUPERIOR AVENUE
MUNSTER IN 46321

DEKALB MRI
C/O COLL SVCS OF FREEPORT
PO BOX 496
FREEPORT IL 61032

ELLEN BARNES, DDS
345 W SULLIVAN ROAD
AURORA IL 60506-1404

ILLINOIS NEURO-SPINE CENT
PO BOX 2091
AURORA IL 60507-2091

DELNOR COMM HOSPITAL
PO BOX 739
MOLINE IL 61266-0739

EMERGENCY TREATMENT SC
900 JORIE BLVD, STE 220
OAK BROOK IL 60523

INGALLS MEMORIAL HOSPITAL
1 INGALLS DRIVE
HARVEY IL 60426

DEVRY UNIVERSITY
C/O ENTERPRISE RECOVERY
2400 S WOLF RD, STE 200
WESTCHESTER IL 60154

EMPI
599 CARDIGAN ROAD
SAINT PAUL MN 55126-4099

JEWEL OSCO
C/O TRS RECOVERY SERVICE
PO BOX 60012
CITY OF INDUSTRY CA 91716-0012

DOLLAR GENERAL
C/O CLEARCHECK, INC
PO BOX 27087
GREENVILLE SC 29616-2087

FAITH HUML
31 CHURCH STREET
SANDWICH IL 60548

JIM & JODI MCCULLOM
832 S SECOND STREET
DEKALB IL 60115

DR. ALAM SAROOR
1200 W SOUTH STREET
PLANO IL 60545-1790

FIFTH THIRD BANK
PO BOX 740778
CINCINNATI OH 45274

JOHN A GORDON, DMD
901 WEST ROUTE 34
SUITE 103
PLANO IL 60545

DR. GUILLERMO PHILLIPS
C/O MEDICAL COLLECTION SYS
725 S WELLS ST, STE 700
CHICAGO IL 60607

FIRST CONSUMER NATL BANK
C/O GENESIS FINANCIAL
PO BOX 2445
HARKER HEIGHTS TX 76548

KISHWAUKEE COMM HOSPITAL
626 BETHANY ROAD
DEKALB IL 60115

DR. MARIANA GIGEA
C/O FALLS COLLECTIONS SERV
PO BOX 668
GERMANTOWN WI 53022

FOX VALLEY CARDIOVASCULAR
1320 N. HIGHLAND AVE
STE. A
AURORA IL 60506-1460

KISHWAUKEE COMM. HOSPITAL
MAIL PROCESSING CENTER
P.O. BOX 739
MOLINE IL 61266-0739

DREYER MEDICAL CLINIC
1870 WEST GALENA BLVD
AURORA IL 60506

HSBC BANK NEVADA
16430 N SCOTTSDALE 300
SCOTTSDALE AZ 85254

KRANE PRODUCTS
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BOCA RATON FL 33431-0721

DRS. KASPER, HEATON ET AL
7625 W 159TH STREET
TINLEY PARK IL 60477-1309

ILIANA SURG & MED CTR
701 SUPERIOR AVENUE
MUNSTER IN 46321

LABORATORY PHYSICIANS LLC
PO BOX 10200
PEORIA IL 61612-0200

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LIFEWATCH/CCR PO BOX 24475 CLEVELAND OH 44124	PALOS EMERGENCY MED SVC C/O MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD CHICAGO IL 60606	RUSH-COPLEY MEDICAL CENTER 2000 OGDEN AVE. AURORA IL 60504
LOYOLA U MED CTR PO BOX 95994 CHICAGO IL 60694-5009	PEMS C/O ILLINOIS COLLECTION SV PO BOX 646 OAK LAWN IL 60454-0646	SBC COMMUNICATIONS C/O NCO FINANCIAL SERVICES PO BOX 41417, DEPT 99 PHILADELPHIA PA 19101
LOYOLA UNIV PHYSICIANS C/O MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD CHICAGO IL 60606	PHYSICANS PROMPT CARE 18210 LAGRANGE ROAD SUITE 110 TINLEY PARK IL 60477	SCHOLASTIC 2931 EAST MCCARTY STREET JEFFERSON CITY MO 65102
MIDWEST PAIN MGMT CTR 701 SUPERIOR AVE MUNSTER IN 46321	PRAIRIE VIEW DENTAL, LLC 115 W PEACE ROAD SYCAMORE IL 60178	SMITH & TUCKER 1958 ABERDEEN CT, SUITE 1 SYCAMORE IL 60178
MIDWEST PHYSICIAN GROUP C/O ILLINOIS COLLECTION SV PO BOX 646 OAK LAWN IL 60454-0646	PROGRESSIVE INSURANCE C/O NCO FINANCIAL SERVICES PO BOX 41417, DEPT 99 PHILADELPHIA PA 19101	SOUTHWEST PHYSICAL THERAPY 18210 LAGRANGE ROAD TINLEY PARK IL 60477
MUHAMMED MOHUIDDEN 19 JOYCE LANE STREAMWOOD IL 60107	PROVENA MERCY CENTER 1325 N. HIGHLAND AVE AURORA IL 60506	SULLIVAN URGENT AID C/O ILLINOIS COLLECTION SV PO BOX 646 OAK LAWN IL 60454-0646
MUNSTER RADIOLOGY GROUP 9201 CALUMET AVENUE MUNSTER IN 46321	REDDY MED ASSOCIATES PO BOX 2184 INDIANAPOLIS IN 46206-2184	SULLIVAN URGENT AID CTR PO BOX 87844 CAROL STREAM IL 60188-7844
NICOR POB 2020 AURORA IL 60507-2020	RESURGENT CAPITAL SVCS C/O VIKING COLLECTIONS SVC PO BOX 59207 MINNEAPOLIS MN 55459-0207	TARGET NATIONAL BANK PO BOX 59317 MINNEAPOLIS MN 55459-0317
OPEN ADVANCED MRI PO BOX 75010 BALTIMORE MD 21275-5010	RICHARD A. LEVY, MD 4647 W LINCOLN HIGHWAY MATTESON IL 60443	TCF BANK C/O MILLENIUM CREDIT CONS PO BOX 18160 WEST SAINT PAUL MN 55118-0160
OPEX COMMUNICATIONS C/O I. C. SYSTEM, INC. PO BOX 64437 SAINT PAUL MN 55164-0437	ROAD RANGER 229 C/O TRS RECOVERY SERVICES PO BOX 60012 CITY OF INDUSTRY CA 91716-0012	TELECHEK C/O GS SVCS LTD PARTNERS PO BOX 2667 HOUSTON TX 77252-2667

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TUSCALOOSA AL 35403-2864

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TRACE AMBULANCE
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TINLEY PARK IL 60477

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C/O CREDIT MGMT CONTROL
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VALLEY EMERGENCY CARE
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MONITOR FINANCIAL SVCS
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